



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

RECEIVED

'05 FEB 24 10:45

STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST

NAME(Last)	(First)	(Middle)	TELEPHONE
HOAG	John Stevens	Keali'iwahamana	808-293-6466
MAILING ADDRESS (Street)			FAX
55-510 Kamehameha Highway			808-293-6566
(City)	(State)	(Zip Code)	
Laie	Hawaii	96762	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Brigham Young University - Hawaii Campus			808-293-3211
MAILING ADDRESS (Street)			FAX
55-220 Kulanui Street BYUH Box 1952			
(City)	(State)	(Zip Code)	
Laie	Hawaii	96762	

PART II ORGANIZATION

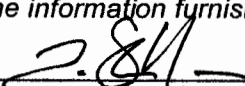
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
Hawaii Reserves, Inc.	808-293-9201	
MAILING ADDRESS (Street)	FAX	
55-510 Kamehameha Highway	808-293-6456	
(City)	(State)	(Zip Code)
Laie	Hawaii	96762
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE	
Michael Bliss	808-293-3705	
MAILING ADDRESS (Street)	FAX	
55-220 Kulanui Street BYUH Box 1952		
(City)	(State)	(Zip Code)
Laie	Hawaii	96762

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	<u>Housing</u>	Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.


(Signature of Lobbyist)

2/22/05
(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
------	--

Eric Shumway

President

NAME OF ORGANIZATION (if applicable)

TELEPHONE

Brigham Young University Hawaii Campus

808-293-3700

MAILING ADDRESS (Street)

FAX

55-220 Kulanui Street BYUH Box 1971

(City)

(State)

(Zip Code)

Laie

Hawaii

96762

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.


(Signature of Authorizing Officer or Person Represented)

Feb 22, 2005
(Date)